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PERCEIVED LIFE SATISFACTION AMONG GAY MALES: THE COMING-OUT PROCESS

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PERCEIVED LIFE SATISFACTION AMONG GAY MALES:
THE COMING-OUT PROCESS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Kimberly Dawn Carter

June 2016

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ABSTRACT

This research project was a mixed method of both a quantitative and qualitative design to examine the perception of 38 gay male's life satisfaction post coming out. In the past few years, laws affecting the gay community have been at the forefront of policies and debates, given all communities an insight into the specific challenges that are endured. As the gay community starts to openly live their lives as a gay man, there has been a need to accept and understand not only the challenges, but to give acceptance.

Additionally, this project sought out to determine if the gay community feels that their life satisfaction has increased post coming out to their family, friends, and coworkers, furthermore to be able to live a life not of shame, but of pride and acceptance of themselves.

ACKNOWLEDGMENTS

I would like to give my deepest gratitude to Dr. Rosemary McCaslin for her guidance, patience, advice and encouragement when it was needed the most. Dr. McCaslin remained interested in this project, and was well informed on the topic. Having guidance in this diverse topic by Dr. McCaslin gave me the confidence to seek out the answers concerning gay male's perceptions of their life satisfaction post coming out.

Furthermore, I would like to extend gratitude to Dr. Thomas Davis and Dr. Erica Lizano for their knowledge in this diverse topic and assistance when I was first started formulating the idea around this project.

DEDICATION

This project is dedicated to my son, Kyle, and all of my dear family and friends who are a part of the LGBTQ community. I have been truly blessed by my son, family and friends, because without them I would have never been given the chance to not only learn unconditional love, but to truly understand the LGBTQ community and their challenges. My life has been enriched because of you all.

Thank you for being true to yourself. I love you son.

TABLE OF CONTENTS

| | |
|---------------------------------------------------|------|
| ABSTRACT | iii |
| ACKNOWLEDGMENTS | iv |
| LIST OF TABLES | viii |
| CHAPTER ONE: INTRODUCTION | |
| Problem Statement | 1 |
| Purpose of the Study | 4 |
| Significance of the Project for Social Work | 6 |
| Research Question | 7 |
| CHAPTER TWO: LITERATURE REVIEW | |
| Introduction | 8 |
| Defining Coming Out | 8 |
| Life Satisfaction | 9 |
| Belonging to Gay Communities | 9 |
| Emotional and Psychological Implications | 10 |
| Family Relationships..... | 15 |
| Theories Guiding Conceptualization | 15 |
| CHAPTER THREE: METHODS | |
| Introduction | 17 |
| Study Design | 17 |
| Sampling..... | 18 |
| Data Collection and Instruments..... | 18 |
| Procedures | 19 |
| Protection of Human Subjects | 20 |

| | |
|------------------------------------------------------------------------|----|
| Data Analysis..... | 21 |
| Summary | 21 |
| CHAPTER FOUR: RESULTS | |
| Introduction..... | 22 |
| Presentation of the Findings | 22 |
| Demographics..... | 22 |
| Frequencies | 25 |
| Family Perception | 26 |
| Social Well-Being..... | 29 |
| T-Test | 29 |
| Correlation | 30 |
| Qualitative Measures | 30 |
| Summary | 31 |
| CHAPTER FIVE: DISCUSSION | |
| Introduction..... | 32 |
| Discussion | 32 |
| Limitations | 33 |
| Recommendations for Social Work Practice, Policy and Research | 34 |
| Social Work Practice..... | 34 |
| Policy and Research | 35 |
| Conclusion..... | 36 |
| APPENDIX A: QUESTIONNAIRE | 37 |
| APPENDIX B: INFORMED CONSENT | 41 |

| | |
|----------------------------------------|----|
| APPENDIX C: DEBRIEFING STATEMENT | 43 |
| REFERENCES..... | 45 |

LIST OF TABLES

| | | |
|-----------|----------------------------------------------------------|----|
| Table 1. | Which Race/Ethnicity Best Describes You? | 23 |
| Table 2. | Relationship Status | 24 |
| Table 3. | Age of Respondents when they Realized they were Gay..... | 24 |
| Table 4. | Participant has Come Out | 25 |
| Table 5. | Age Respondents Started Living Openly Out..... | 25 |
| Table 6. | Parents' Relationship | 26 |
| Table 7. | Father Relationship | 27 |
| Table 8. | Mother Relationship | 27 |
| Table 9. | Family Relationship | 28 |
| Table 10. | Heterosexual Friends' Acceptance..... | 28 |
| Table 11. | Happier Post Coming Out | 29 |

CHAPTER ONE

INTRODUCTION

This chapter encompasses an overall description of current issues that plague the gay community and their emotional well-being post coming out. This study approaches an overall look into specific issues that gay men face after accepting their sexual orientation; living openly as a gay man, furthermore, looking at their psychological and emotional well-being while being hindered by the prejudice that clouds around the gay community. According to Cole, Kemeny, Taylor, and Vissche, "Many gay men inhibit the public expression of their homosexual identity to avoid stigmatization, ostracism, or physical assault" (1996), to avoid rejection.

Problem Statement

Gay males while growing up recognize that there is something different about them; having an attraction to the same sex they may feel confused triggering depression and suicidal thoughts, leaving their overall emotional well-being to decline.

Youth is a critical time of change and psychological and biological development go hand in hand with how youth will respond and grow mentally (Talbert, 2005). Allen and Jones have noted that "When young people begin to develop a lesbian and gay sexuality they often find it hard to come to terms

with, or to understand, these feelings and begin to question who they really are” (2005, p. 122).

As the homosexual population is maturing, there are certain norms and values that the heterosexual population recognizes, and that the homosexual population does not share. Social norms and values that may be problematic for homosexual men are that they appreciate being with same sex partners, and are scrutinized by society leaving them socially oppressed; making what feels like a normal aspect of a gay man’s life looked at by the heterosexual population as disgusting and sickening. Unfortunately, according to Marsiglio, 46 percent of gay males have reported that they have lost a friend after disclosing their sexual identity (1993).

Researchers have found that there is an increased risk factor within the gay community of having major depression, panic disorder, anxiety, eating disorders, poor self-esteem, alcohol dependency, drug dependency, and suicide. Suicide is 2.5 percent higher for the homosexual individual than the heterosexual individual (Russell & Joyner, 2001), meaning that they are four times more likely to commit suicide or make a serious attempt than a heterosexual person (McAndrew & Warne, 2010).

Additional mental health problems are experienced among the homosexual population than the heterosexual population, perhaps because of discrimination against gay men (Chakraborty, McManus, Brugh, Bebbington, & King, 2011) or because they are not able to be openly out. Because of the

discrimination, the homosexual population tends to have more social and life stressors than the heterosexual population including verbal, physical, and mental abuse post coming out. These factors can shift a gay individual from an otherwise healthier state, to one of depression, anxiety, physical mutilation, and often suicide (Williams, Connolly, Pepler, & Craig, 2004).

The risk of suicide and other mental illnesses in the gay community flow within all of the social economic groups, cultures, and classes. No one is guarded from the sexual identity that they relate to just because where they have come from. According to Lombardi, Wilchins, Priesing, and Malouf, the gay male post coming out will live in social environments with social rejection and isolation, diminished social support, discrimination, and physical and verbal abuse (2001).

After being able to be openly gay one's sense of belonging into a gay community is likely to be associated with less depression and better mental health. Wanting to feel a part of an accepting community, gay men may seek out communities that are accepting of them, therefore forming a "family" within that community. According to Morris, McLaren, McLachlan and Jenkins, the only research that has been conducted investigated how a sense of belonging to a singular concept of the community was related to gay men's depression (2015, p. 807).

The concern for this problem ranges from micro to macro (self to the legislation), because in different contexts people have an interest in the

current changes that the world is adapting to, leading to making changes in policies, health treatment, sales, and in contracts. Being able to recognize gay marriages, people are able to live as a married couple and receive the same benefits such as health insurance as heterosexual couples. This year, 2015, “the court ruled that the Fourteenth Amendment requires states to allow same-sex couples to marry and to recognize marry and to recognize marriages of same-sex couples performed outside of their home state.” (Lambda Legal, 2015, Para. 1).

Being able to understand the life satisfaction of gay males after they come out to themselves and others, living openly in society, and how their well-being has been affected is crucial to understanding the needs that the gay community needs from social work as a support system. This study would be able to measure the cost of coming out vs. the benefits of coming out as well as the quality of their life having increased or decreased.

Purpose of the Study

Gay men are likely to experience issues from social homophobic attitudes once they have proceeded to be openly gay in their community. Understanding the cost vs. benefits of full disclosure of one’s sexual identity will help gain awareness of how life satisfaction changes post coming out.

The purpose of this study is to measure life satisfaction of gay male’s post coming out. Therefore, areas that will be explored are gay males who are

living their life openly as a homosexual and their life satisfaction as they see it in correlation with before they came out and the affects after.

Exploring the perspectives and experiences of gay men who have disclosed their homosexuality to others, this study utilizes a mixed design of quantitative and qualitative research asking questions about overall acceptance of family and peers post coming out. Because of the exploratory nature of the topic, a qualitative method was chosen to further explore quantitative questions that would better provide descriptive understandings behind the answers. Mullins stated that we should never assume that a client is heterosexual but believe that homophobia is in the client and society is the problem, therefore; decrease internalized homophobia and achieve a positive identity as a gay person (2012, p. 1053).

Major issues that need to be addressed are identifying factors specific to this unique population in relation to family and friend relationships as well as employment/ job opportunities. As an example, a gay individual who is seeking employment may be concerned with discrimination against him if the employer knew of his sexual orientation. This research would give a better understanding of this being a problematic issue amongst the gay men post coming out or not.

Juster, Smith, Ouellet, Sindi and Lupien stated that “Completely disclosing one’s sexual orientation is correlated with less stress (and its various manifestations)” (2013, p. 105).

Significance of the Project for Social Work

Gay issues are gradually through the years coming to the forefront of social work practice, it would be beneficial to the social work profession to understand the changing dynamics of the homosexual population, so that we can better assist in accepting this diverse population. Because homosexuality is still widely stigmatized, it was viewed a little more than 30 years ago as pathological (Mullins, 2012). Being that there is a lack of participants in gay research, it has likely “impacted training in mental health services” (Mullins, 2012, p. 1053), thus, leaving very few mental health professionals who specialize in the gay community.

It is important for social work practitioners to utilize the generalist model to be effective in helping and understanding the difficulties of gay men as they go through different areas of their life, making us aware of engaging, assessing, intervening and evaluating. Risk assessment with this population is important since there is a high risk of self-harm and suicide among their group. With more empirical- based research hopefully social workers would be able to help the client utilize his strengths and formulate a proper intervention to help the client resolve the issues that come along with belonging to this diverse population being but not limited to, lack of social support, isolation, and social rejection from family and peers. Furthermore; it would be most beneficial for the social work community to expand their understanding about the gay community, so they would be better equipped to provide emotional support.

Ultimately, this study could give insight to social workers who are dealing with the gay community and those who are planning on coming out. Social workers who utilize research on post coming out would have a better understand of the challenges as well as the cost vs. the benefits of full disclosure.

Research Question

How is self-perception of life satisfaction seen by gay males between the ages of 21-40 post coming out?

CHAPTER TWO

LITERATURE REVIEW

Introduction

This chapter will provide a summary of the literature on gay males, and will discuss research on gay culture, family relationships, belonging to gay communities, mental health and perceived life satisfaction as viewed by their own criteria set. Additionally, it will review theoretical views on identity confusion, identity comparison, identity tolerance, identity acceptance, and identity pride and identity synthesis.

Defining Coming Out

Coming out use to be termed as “coming out of the closet” when a gay man decides to share his sexual identity with society, family, friends, and work, so that he could live his life openly as a gay man.

Coming out is generally presented as an activity that is carried out once and then dispensed with, finished, never needing to be repeated again. Henceforth, the individual is known as a gay man or lesbian woman; the individual’s sexual identity is set in stone. Through this completion of coming out, the gay or lesbian identity becomes as stable and as unified as other identity categories, such as male/female or white/black, in the public’s mind. (Justice, 2012, p. 39)

Life Satisfaction

Life satisfaction is pertaining to a person's cognitive and judgmental process, looked at as a "global assessment of a person's quality of life according to his chosen criteria" (Diener, Emmons, Larsen, & Griffin, 1985, p. 71). According to Pavot and Diener,

Life satisfaction refers to a judgmental process, in which individuals assess the quality of their own lives on the basis of their own unique set of criteria. A comparison of one's perceived life circumstances with a self-imposed standard or set of standards presumably made. (2008, p. 162)

Utilizing the Satisfaction with Life Scale (SWLS) helps when assessing satisfaction in one's life as a whole and is recommended as a complement to scales that focuses on psychopathology or emotional well-being (Pavot & Diener, 2008).

Limitations of the SWLS are that because it is a self-report tool the respondent can consciously distort their response if they want to, therefore not given a true report of their life satisfaction.

Belonging to Gay Communities

Enhancing gay men's sense of belonging to gay groups, and with gay friends, is likely to be associated with fewer depressive symptoms, by virtue of their enhanced sense of belonging to the general community enhancing their self-satisfaction. A community sample of 177 Australian self-identified gay

men, aged from 18 to 79 years ($M = 43.00$, $SD = 13.34$), participated in one study. One half of the participants were in a same-sex relationship, and the majority of participants lived with others (59%). A minority of the gay men had children ($n = 20$, 11.3%) or grandchildren ($n = 4$, 2.3%). Over one half of the sample had a university degree and was employed full-time. Annual income varied across the sample, with the greatest number of participants earning less than \$20,000 per annum; however, 20% of participants earned in excess of \$60,000 per annum (Morris, McLaren, McLachlan, & Jenkins, 2015). Gay men seek to be a part of an accepting community where they will form a “family” unit among their homosexual peers who are accepting of them. “There is no research to date investigating the mental health benefits of a sense of belonging to the gay community. The only research that has been conducted investigated how a sense of belonging to a singular concept of “the gay community” was related to gay men’s depression” (Morris, McLaren, McLachlan, & Jenkins, 2015, p. 807). Limitations of this study is that the current study is unable to determine “issues of causality due to its correlational design” (2015, p. 816). A sense of belonging directly will influence mental health; while it is possible that mental health could cause a diminished sense of belonging to the general and gay communities.

Emotional and Psychological Implications

The mental health and well-being of LGBT individuals is a growing concern in both the homosexual and heterosexual communities. The gay,

bisexual, and lesbian population are three to four times more likely to commit suicide than the heterosexual person (Hegna & Wichstrom, 2007), while they perceive their life satisfaction to be at a low level. Low life satisfaction for the homosexual community is a concern for social workers and for the general overall population, due to the concern for their overall general health. A stratified random sample utilizing 44.8% non- Hispanic Black, 30.77% Hispanic, 13.7% White, and 10.8% Asian, Native Hawaii or other Pacific Islander, or bi multi- racial. The sample was produced from over 1,000 high school students in Boston, where the population is equivalent to 10% of the sample being homosexual, and the remainder being heterosexual. This study found that 50% of the males perceived discrimination, along with 25% of the females, having social anxiety and scoring high in emotional distress (Almeida, Johnson, Corliss, Molnar, & Azrael, 2009).

Compared to heterosexual men, homosexual men have a greater issue with anxiety disorders, mood disorders, and substance use disorders, having reported higher levels of depression and hopelessness, with less life satisfaction. Looking at gay men through a developmental perspective, Bybee, Sullivan, Zielonka, and Moes utilized samples from early adulthood (ages 18-24) and mid-life (25-48) by using a cross- sectional design. The sample came from 86 heterosexual men and 81 gay men between the ages of 18- 48 who were recruited from psychology classes, family, friends and acquaintances of the students. The demographic population of the

heterosexual group where 69 white, nine Black, 11 Hispanic, five Asian, and two listed as “other” with the majority holding a college degree or better. Gay men in this survey where self-reported to be 63 White, eight Black, five Hispanic, two Asian, and three listed as “other” (2009). As gay men get older chronic shame, guilt and depression are less severe than when they were younger, possibly linked to being past the shame of the coming out process where their sexual identity is no longer concealed, being that this could lead to their life satisfaction increasing at an older age opposed to a younger age when they are still concealing their sexual identity. Erikson’s theory of development defines their younger years for a gay male as a time of identity confusion and turmoil leaving age of the gay male to be of importance. Unfortunately, 46 percent of gay males have reported that they have lost a friend after disclosing their sexual identity (Marsiglio, 1993).

In stage five of Erikson’s Psychosocial Theory, Identity versus role confusion, the LGBT individual starts to explore his or her identity. This occurs in adolescence, typically during the ages of 12 to 18 when we start to discover who we are as an individual, and separate from our family unit. Life is starting to get complex for the individual, as the person is no longer a child, but also not an adult. Being in the stage of trying to find out who they are, and their role in life, the LGBT adolescence will begin to feel confused, and uncertain about their identity (Zastrow & Ashman, 2013).

Many of the emotional and physical risk factors for LGBT individuals are most prominent during the process of coming out. “Many gay men inhibit the public expression of their homosexual identity to avoid stigmatization, ostracism, or physical assault” (Cole et al., 1996, p. 244), to avoid social rejection. Closeted gay men may experience poorer physical health than a gay man who is living openly because they are repressed from living their life openly as a gay man. Data were collected from 222 HIV- seronegative participants that were associated with UCLA and the greater Los Angeles gay community. The participants were 18 and older, gay and bi sexual men, answering questionnaires that measured concealment and other psychological variables.

Coleman (1982) described coming out as beginning with “acknowledging a thought, or a fantasy” (p. 33). Gay men before they come out conceal the core part of themselves causing enormous emotional consequences. Gender role and sexuality are the two important aspects in growth development of men, and emerge at the same time in a boy’s life. Homophobia and gender role constriction may have a crippling impact on the psychosocial development of a gay man. His relationships with himself, his family, friends, education, religion, government, health care, law, and career may all be affected (Brandel, 2011).

The coming out process often begins with recognizing homosexual feelings and identifying to one’s self and others as lesbian, gay, bisexual, or

transgender. Coming out is also a period of continually deciding whether or not to disclose this information to specific friends, family members, and coworkers (Anderson & Mavis, 1996). The decision that is made to come out is motivated by the desire to validate one's own lifestyle and inner relationship, thus balancing the cost of disclosing the person's own sexual identity status. There is a high rate of suicide among gay men, because of their depression that comes along with their uncertainty and fear of reactions when they have decided to come out.

Burns, Kamen, Lehman, and Beach used a cross-sectional design with a sample of convenience to study discrimination of gay men. The sample size was composed of 307 men consisting of 75.6% White, 7.5% Black, and 9.2% mixed/ other race with the age ranging from 18 to 84. Education of the sample was 31.9% having attained a graduate degree, 30.3% a bachelor's, 28.7% completed some college, 9.1% has a high school diploma, and 71.3% identifying as homosexual.

This study found that internalized homophobia, perceived discrimination, and gay identity development had led to social anxiety. Regardless of how gay men feel about their sexual orientation, discriminatory events exaggerate their social anxiety. The minority stress framework was used in this study and is used to suggest that stressors brought on from the environment of discrimination, victimization, and maltreatment causes health disparities in the minority (2010).

Family Relationships

Family lives of gay men has been a source of controversy during the past decade, but despite the discrimination and prejudice, gay men have been able to create and sustain family relationships (Patterson, 2000).

Understanding the family dynamics of gay men and their relationships with their families, Patterson used it be able to understand the positive adjustment gay men face even when dealing with stressful conditions. Looking at same gender-relationships, parent-child relationships, and other family relationships one can achieve a better insight on family dynamics of the homosexual population and how life satisfaction is made better by having a fulfilled family relationship. Limitations of this research is that much of the research is done on small samples that are predominantly White, well-educated, middle class American and does not give enough information on other social, economic statuses, and demographic status (2000).

Theories Guiding Conceptualization

Cass developed a model that uses theory to explain gay and lesbian development. The Cass Model helps us understand that people are unique with everyone having their own story. In 1979 Cass developed this model describing the process of six stages of gay and lesbian development aiming to explain the thoughts, feelings, and behaviors of the LGBT adolescent (Cass, 1979). The first of these stages is Identity Confusion where the adolescent wonders if they could be gay. Going through this stage the person is first

aware of their gay or lesbian thoughts, feelings, and attractions. The second is the Identity Comparison where the person accepts that there is a possibility that they may be part of the LGBT community and self-alienation becomes isolation. The third is Identity Tolerance where the person acknowledges and seeks out other gay and lesbian people to combat the feeling of isolation. The fourth is Identity Acceptance where the person thinks that they may be okay and they begin to accept rather than tolerate their identity. The fifth stage is Identity Pride where they want to come out and let people know who they are, and emerge into the Gay and Lesbian culture, the sixth and final one is Identity Synthesis where the person integrates his or her sexual identity with all other aspect of self, and sexual orientation (Cass, 1979).

Looking at the different comparisons of transitions through one's life in stage five of Erikson's Psychosocial theory (stages of development), if the LGBT adolescence cannot come to terms with their identity role, (example; a boy who has sexual urges for other boys or a boy who identifies as a female), then they will struggle going into the sixth stage (intimacy versus isolation). In the sixth stage "people who do not attain intimacy are likely to suffer isolation (Zastrow & Ashman, 2013). In Cass's third stage (Identity Tolerance), the LGBT adolescence will have feelings of isolation, and if the adolescent does not go through these cycles in a healthy way then he or she may seek ways such as suicide as a way out.

CHAPTER THREE

METHODS

Introduction

Chapter Three gives an overview of the methodology used in this study. Being discussed will be the design of the study, sampling, data collection and the instrument that was utilized to collect the data. This chapter will also discuss the procedures as well as the protection of human subjects. Last, this chapter will discuss how the data was analyzed.

Study Design

The purpose of this study was to explore gay males' perspectives of their life satisfaction post living openly gay, specifically, looking at answering the question, are gay men happier after they are able to openly live in society as a gay man? Since this study focuses on gay men and the perception of their personal quality of life, a survey utilizing both quantitative and qualitative methods were used measuring the data by using a Likert scale, which is measurable between the variations of one (1) not at all, to four (4) very likely/very well, to do this research. There were eight (8) demographic questions listed in the questionnaire along with questions related to social satisfaction.

The strength of utilizing a non-random purposeful sample group is that it is discrete so that the participants can answer the survey question with

complete autonomy. Due to the complexity of the population, implementing a survey allows the study to view a broader range of participants.

Potential limitations are recognized, as there is a limited amount of research that has been done on this topic. Limitations of this study are that the sample was largely from the 25- 29 age group. The ethnic and racial makeup may likely not be representational of the larger gay population. Additionally, the sample may be skewed do to the limited age range.

Sampling

Effectively trying to obtain a broad representation of the gay community, the study consisted of 38 males who meet the criteria (age, gay, openly as a gay man). Participants where between 21 and 40 years old. This sample was chosen to obtain a broad representation of the gay community that has been living openly out for a brief to a lengthy period of time. The purposed sample gathered both qualitative and quantitative information from participants who responded to the survey.

Data Collection and Instruments

Data was collected to measure the life satisfaction of openly gay men by using a quantitative survey with supportive qualitative questions to aid in understanding of the reasoning behind the quantitative response. The questionnaire was created by the researcher and was self-administered by the participants (see Appendix A). The first section of the survey aimed to

measure the independent variables. This section is based on ordinal and nominal measurement, collecting demographic information of the participants, such as age, race/ethnicity, and sexual orientation. The survey also accounted for age the participant came out, as well as their current relationship status.

The final section of the survey encompasses a scale level of measurement, which will identify the level of intimacy that the participant has with family and peers, as well as their overall level of happiness post coming out.

The instrument that was created for this study was developed by the researcher since there are a lack of instruments available that are accurate for this study. There are existing instruments available for life satisfaction however; they do not identify the variables that impact and measure life satisfaction that is unique to gay men. The strengths that this survey carries are that it is both quantitative and qualitative, so that it allows further exploration of questions that were answered by using a Likert scale.

Procedures

Thirty-eight participants were gathered from surveys that they answered through SurveyMonkey® over social media. The study was advertised through social media with the link to SurveyMonkey®, allowing the participants to click on the link and answer the survey. By using a snowball sample, other participants were able to link the survey on their social media site allowing their peers access to the survey through SurveyMonkey®. After Participants

clicked on the link to the study they were directed to the informed consent disclosing the nature of the study and were asked to click on the box if they agree to take the study. After participants clicked on the box to agree to take the study they were directed to the questionnaire. Additionally, using SurveyMonkey® allowed complete autonomy and confidentiality to the participant. Once the questionnaire was completed the participants did not have access to their survey or others.

Data collection took place between January 2016 and March 2016 and took approximately 15 minutes per participant to complete.

Protection of Human Subjects

An informed consent form (see Appendix B) was attached to the survey on SurveyMonkey®. The consent form included the purpose of the study informing the participants that it is voluntary. This form was provided before the survey was self - administered.

The debriefing statement was provided to participants (see Appendix C) with contact information in case they have any questions or concerns. Additionally, the debriefing statement indicated approximately when the results will be available and how to access them.

Protecting the confidentiality and anonymity of the participants was done by requiring a password to protect access to the answers on the questioners. Second, there will be no identifying information used in data collection.

Data Analysis

The data for demographics and perception of life satisfaction was transformed into nominal and ordinal scale data for descriptive analysis and to determine correlations by utilizing SPSS software. By plugging the data into the SPSS software the relationship between the variables would be explored. The scale data was factored in by a four (4) point Likert scale allowing a strongly agree (1) to strongly disagree (4). The study included frequency distribution and measures of means.

Summary

The study design, sampling, data collection, procedures, methods for protecting human subjects, and data analysis were chosen in order to safely and accurately explore gay male's perspectives of life satisfaction. By using a mixed design of both quantitative and qualitative, this study was able to appreciate the perception of life satisfaction that is unique to this demographic group.

CHAPTER FOUR

RESULTS

Introduction

This chapter provides an explanation of the data that was collected along with the test that were ran to interpret the collected data, providing an understanding of the results. 38 participants responded to the survey via SurveyMonkey®, providing a small, but functional sample.

Presentation of the Findings

The sample size was small (N = 38), however, performing an analysis was capable of providing adequate results for this research.

Demographics

Gender consisted of all males (97.4%) with one identifying as being transgender (2.6%). Ages of the respondents were sub grouped and ranged from 21 to 40. Eight self-identified as being between 21-24, twenty between 25-29, eight between 30-35, and two between 36-40.

Ethnicity of respondents (table 1), one (2.6%) self-identified as multiple/other, three (7.9%) self-identified as African American, eight (21.1%) self-identified as Hispanics, 11 (28.9%) self-identified as Caucasian, and 15 (39.5%) self-identified as Asian/ Pacific Islander.

Table 1. Which Race/Ethnicity Best Describes You?

| | Frequency | Percent | Valid Percent | Cumulative Percent |
|---------------------------------------------------|-----------|---------|---------------|--------------------|
| Valid Multiple ethnicity / Other (please specify) | 1 | 2.6 | 2.6 | 2.6 |
| Asian / Pacific Islander | 15 | 39.5 | 39.5 | 42.1 |
| Black or African American | 3 | 7.9 | 7.9 | 50.0 |
| Hispanic | 8 | 21.1 | 21.1 | 71.1 |
| White / Caucasian | 11 | 28.9 | 28.9 | 100.0 |
| Total | 38 | 100.0 | 100.0 | |

Relationship status was measured by asking the respondent to choose between being married, in a relationship and cohabitating with a partner, in a relationship, but not cohabitating, or single. Eleven (28.8%) self-identified as being in a relationship and cohabitating with a partner, nine (23.7%) identified as in a relationship, but not cohabitating, and 18 (47.4%) identified as being single. The results are also presented in table 2.

Table 2. Relationship Status

| | Frequency | Percent | Valid Percent | Cumulative Percent |
|---------------------------------------------------------|-----------|---------|---------------|--------------------|
| Valid In a relationship and cohabitating with a partner | 11 | 28.9 | 28.9 | 28.9 |
| In a relationship, but not cohabitating | 9 | 23.7 | 23.7 | 52.6 |
| Single | 18 | 47.4 | 47.4 | 100.0 |
| Total | 38 | 100.0 | 100.0 | |

Table 3 represents participants answers to the age when they first realized they were gay, ranging from three years old to nineteen years old (R = 16, M = 12.00, SD = 3.86).

Table 3. Age of Respondents when they Realized they were Gay

| | N | Range | Mean | Std. Deviation |
|--------------------------------|----|-------|-------|----------------|
| Age when realized you were gay | 38 | 16 | 12.00 | 3.869 |
| Valid N | 38 | | | |

When asked if the participant has come out, 23 (60.5%) reported that they are openly out to family, friends, coworkers, etc. are aware. 15 (39.5 %) stated that they are selectively out to only certain groups or individuals (table 4).

Table 4. Participant has Come Out

| | | Frequency | Percent |
|-------|-----------------------------------------------------------------|-----------|---------|
| Valid | Yes openly out (e.g., family, friends, coworkers, etc. | 23 | 60.5 |
| | Yes selectively out (e.g., only to certain groups or individual | 15 | 39.5 |
| | Total | 38 | 100.0 |

The age that respondents started living openly out was reported by respondents to be between the ages of 11 and 28 (table 5) with the R = 17, M = 19.13, and SD = 3.58.

Table 5. Age Respondents Started Living Openly Out

| | N | Range | Mean | Std. Deviation |
|------------------------|----|-------|-------|----------------|
| Age when you came out: | 38 | 17 | 19.13 | 3.581 |
| Valid N | 38 | | | |

Frequencies

All frequencies were run between choosing strongly agree, agree, disagree, and strongly disagree. For questions regarding parental relationships there was an added option of non-applicable (N/A) to support the idea that the respondent may not have a mom or a dad. Family relationships were run separately from questions of respondents perceived happiness and depression.

Family Perception

Table 6 represents the question; My parent's relationship with me has not changed since I came out to them? Twelve (31.6%) said that they strongly agreed, eleven (10.5%) agreed, ten (26.3%) disagreed, and five (13.2%) strongly disagreed.

Table 6. Parents' Relationship

| | Frequency | Percent |
|----------------------|-----------|---------|
| Valid Strongly Agree | 12 | 31.6 |
| Agree | 11 | 28.9 |
| Disagree | 10 | 26.3 |
| Strongly Disagree | 5 | 13.2 |
| Total | 38 | 100.0 |

Participants were asked if their father accepts that I am gay, nine (23.7%) said that they strongly agreed, four (10.5%) agreed, twelve (31.6%) said they disagreed, two (5.3%) strongly disagreed, and eleven (28.9%) selected N/A as seen in table 7.

Table 7. Father Relationship

| | | Frequency | Percent |
|-------|-------------------|-----------|---------|
| Valid | N/A | 11 | 28.9 |
| | Strongly Agree | 9 | 23.7 |
| | Agree | 4 | 10.5 |
| | Disagree | 12 | 31.6 |
| | Strongly Disagree | 2 | 5.3 |
| | Total | 38 | 100.0 |

My mother accepts that I am gay? Thirteen (34.2%) said that they strongly agreed, thirteen (34.2%) agreed, five (13.2%) said they disagreed, three (7.9%) strongly disagreed, and four (10.5%) choose N/A as seen in table 8.

Table 8. Mother Relationship

| | | Frequency | Percent |
|-------|-------------------|-----------|---------|
| Valid | N/A | 4 | 10.5 |
| | Strongly Agree | 13 | 34.2 |
| | Agree | 13 | 34.2 |
| | Disagree | 5 | 13.2 |
| | strongly Disagree | 3 | 7.9 |
| | Total | 38 | 100.0 |

My family (siblings, grandparents, aunts, uncles, & cousins) relationships have stayed relatively the same since I came out? Eleven

(28.9%) strongly agreed, nineteen (20.0%) said they agreed, seven (18.4) disagreed, and one (2.6%) did not answer this question as seen in table 9.

Table 9. Family Relationship

| | | Frequency | Percent |
|---------|----------------|-----------|---------|
| Valid | Strongly Agree | 11 | 28.9 |
| | Agree | 19 | 50.0 |
| | Disagree | 7 | 18.4 |
| | Total | 37 | 97.4 |
| Missing | System | 1 | 2.6 |
| Total | | 38 | 100.0 |

My heterosexual friends accept that I am gay? Twenty-two (57.9%) said that they strongly agreed, eleven (28.9%) agreed, four (10.5%) said they disagree, and one (2.6%) did not answer the question as seen in table 10.

Table 10. Heterosexual Friends' Acceptance

| | | Frequency | Percent |
|---------|----------------|-----------|---------|
| Valid | Strongly Agree | 22 | 57.9 |
| | Agree | 11 | 28.9 |
| | Disagree | 4 | 10.5 |
| | Total | 37 | 97.4 |
| Missing | System | 1 | 2.6 |
| Total | | 38 | 100.0 |

Social Well-Being

On the terms of participant considering themselves happier post coming out, 17 (44.7%) strongly agreed, 19 (50.0%) agreed, and two (5.3%) disagreed shown in table 11.

Table 11. Happier Post Coming Out

| | | Frequency | Percent |
|-------|----------------|-----------|---------|
| Valid | Strongly Agree | 17 | 44.7 |
| | Agree | 19 | 50.0 |
| | Disagree | 2 | 5.3 |
| | Total | 38 | 100.0 |

T-Test

An independent samples T-Test was conducted to evaluate both the family relationship and the perceived life satisfaction of the participants. Though there was no significance found with family relationships, the test was able to provide results approaching significance to group 1, gay men becoming more suicidal post coming out; openly out to family friends, coworkers, ect. (M = 3.65, SD = .647) (t = 1.84, df = 36, p = .07), then did group 2, selectively out to only certain groups or individuals (M = 3.20, SD .861) (t = 1.73, df = 24.11, p = .09).

Correlation

A bivariate correlations test was conducted to expand findings. This test showed that family members including, mother, father, siblings, grandparents, aunts, uncles and cousin, have positive attitudes toward their gay family member ($r = .38$, $N = 38$, $p = < .01$).

When looking at the participant's acceptance by their mother the test showed that the mothers relationship with the participant had not changed ($r = .40$, $N = 38$, $p = < .01$).

Father relationships with their sons was shown that there was no significant change, therefore remaining unchanged ($r = .54$, $N = 38$, $p = < 0.001$).

Qualitative Measures

There were two qualitative questions that were asked as open ended questions to gain a broader perspective of the participants view behind why or why not they were happier or depressed post coming on. When asking the participant to expand on why they choose the reasoning behind being happier or depressed, the researcher created themes to correspond with answers.

When asked the question of why the participants choose to select the answer to "are you happier since you came out", the consensus of the participants replied that they were happy to be able to be themselves.

The participant's main consensus to the question asking "after you came out you have become depressed", the participants main theme was that they were not depressed, but happy to feel free with nothing to hide.

Summary

The results section of this project consisted of data most relevant to this study. The research utilized descriptive statistics to complete demographic information. Additionally, frequencies were run to obtain measures. Finally, T-Test, and correlations were conducted to compare variables, and qualitative questions were grouped to have a better understanding of the participants feelings towards their life satisfaction.

CHAPTER FIVE

DISCUSSION

Introduction

Chapter Five will bring a conclusion to this project. This chapter will encompass further descriptions of this study. Limitations that surrounded this study as well as further recommendations for research will be mentioned.

Discussion

This research specifically sought out gay men who had already come out. The majority of the respondent were between the ages of 25 to 29, and self-identified as Asian/ Pacific Islander (39.5%).

This study explored gay male's perception of their life satisfaction post coming out. The coming out process entailed sharing ones sexual identity with society, family, friends, and work, allowing the gay male to live his life openly as a gay man. Though this survey was unable to validate the question "How is self-perception of life satisfaction seen by gay males between the ages of 21-40 post coming out", the researcher was able to provide an overall picture of participant's happiness. The data approached significance showing that gay men are more likely to commit suicide post coming out even though family members have acceptance towards their gay family member. It became apparent that though gay men gain family acceptance post coming out, that

they still have suicidal tendencies after their loved ones have accepted them, therefore possibly never gaining full life satisfaction post coming out.

Families' acceptance of the participants was able to provide the assumptions that there is a strong acceptance from family members to the participants. 78.9% of participants agree that their relationship with the members of their family have remained the same post coming out. This suggests that being gay had little to no impact on the family relationship.

Though the findings suggest that participants are suicidal post coming out, a majority of respondents reported that they felt happier post coming out (94.7%). It may be apparent that there is a sense of relief post coming out, so that the gay man can live openly without hiding, but still have pressures that drive him towards suicide.

Other data collected showed no significance between being a male or transgender that was seeking family acceptance. The relationship data that was collected was skewed due to only having one person identify as transgender (2.6%).

Limitations

Limitations of this study included a small sample size and data collected. Utilizing social media and a snowball effect, I was only able to obtain a sample size of 38. As a result, the small sample size weakens the the survey finding. Also weakening the survey findings, ethnicity and age representation where majority Asian/ Pacific Islander and between the ages of 25-29.

Possibly expanding the survey distribution to the Pride Center at Cal State San Bernardino would have generated a representative sample of all ages and ethnic groups.

Another limitation was that the instrument was developed by the researcher and not tested for accuracy prior to this study. The researcher provided her own instrument because there was not one found to identify the variables that impact and measure life satisfaction that is unique to gay men

Recommendations for Social Work Practice, Policy and Research

Social Work Practice

From the results of this study, gay men still struggle with ultimate life satisfaction post coming out, and are at risk of suicide. Gay stigma and debates have been the highlight of LGBT issues for many years, thus providing the gay community the feeling of being discriminated against. Social workers are in the profession to help improve and maintain the well-being of their clients and are avid advocates for LGBTQ issues.

This study could be best utilized by the social work community to understand the changing dynamics of the homosexual population, so that we can better assist in accepting this diverse population as well as understanding the need to help increase the client's well-being.

It is most important for social workers to understand the social issues of gay men when engaging, assessing, intervening, and evaluating as well as

doing a complete risk assessment for suicidal ideation since there is a high risk of self-harm and suicide amongst this community. According to Fawcett “Such a deep well of shame creates a fertile breeding ground for felt stigma, where the very real danger of discrimination fuses with one’s internal negative beliefs, resulting in a destructive, self-sustaining pattern” (2012, Para. 7).

Furthermore, it would be most beneficial for the social work community to expand their understanding about the gay community, so they would be culturally competent to provide emotional support.

Ultimately, this study could give insight to social workers when dealing with a client who is preparing to come out to his family and friends, helping to better understand the cost vs. benefits as well as the emotional implications.

Policy and Research

Future policy to support the social work community working with the gay community, would include social work trainings and practices that are current and mandated, so that social workers can have knowledge to be prepared to work with this diverse population. In addition, social work practice should keep up to date with the changes that are made through state and government, so that social workers would be able to educate and have knowledge of current resources available for clients. Finally, collaboration among social workers, educators, and agencies would keep an open dialogue so that they can all work together to provide adequate support for the gay client.

Future research should be done looking at the wide duration of ages through the coming out process, as well as cultural acceptance. Looking at the age of the clients, length of time they have been out, as well as culture, may give a better look into if length of time and/or cultures playing a role in positive or negative life satisfaction. Last, future research on what aspects, besides family relationships of gay men's life post coming out, are causing suicidal tendencies is needed. Hopefully once that is understood, social workers can help neutralize the stressors and therefore decrease suicide.

Conclusion

This study aimed at looking at the perceived life satisfaction of gay males: post coming out. Using a qualitative and quantitative design, this study revealed perceptions of family and social well-being of gay men. It was found that gay men's relationship with their broad family unit stayed relatively the same, but approaching significance for suicide post coming out.

Though these findings are not representative of the whole gay community, this study provided a view of the internal struggle of sexual orientation after family acceptance.

In conclusion, it is imperative to remember that the social work profession contributes to the betterment of society. Human dignity and worth is an inherent value of all human life regardless of age, sex, ethnicity, or sexual orientation. Bias and beliefs must always be put aside, so that the client can receive the help that he/she deserves.

APPENDIX A
QUESTIONNAIRE

QUESTIONNAIRE

Use: SurveyMonkey®
Quantitative/ Qualitative

Instrument:
Gay Attitudes Survey

Demographics:

Please circle one item or fill in the blank for the following questions:

1. Gender:
 - Male
 - Female
 - Transgender

2. Age:
 - 20 or younger
 - 21-24
 - 25-29
 - 30-35
 - 36-40
 - 41 or older

3. What ethnicity are you:
 - Caucasian
 - African American
 - Indian
 - Asian
 - Arabic
 - Hispanic
 - Other _____

4. Sexual Orientation:
 - Heterosexual
 - Gay Male
 - Questioning

5. Have you come out?
 - Yes, openly out (e.g., family, friends, coworkers, etc. are aware)
 - Yes, selectively out (e.g., only to certain groups or individuals)
 - To whom? _____
 - At what age? _____
 - No, I have not come out to anyone

6. Relationship status:
 - Married
 - In a relationship and cohabitating with a partner
 - In a relationship, but not cohabitating
 - Single
7. Age when realized you were gay: _____
8. Age when you came out: _____

Social Well-being

Please rate how strongly you agree or disagree with the following statements:

9. My parent's relationship with me has not changed since I came out to them.

| | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
10. My mother accepts that I am gay.

| | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
11. My father accepts that I am gay.

| | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
12. My family (siblings, grandparents, aunts, uncles, & cousins) relationships have stayed relatively the same since I came out.

| | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
13. My heterosexual friends accept that I am gay.

| | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
14. You are happier since you came out

| | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |

 - Why was that score chosen _____
15. Before coming out you considered yourself depressed.

| | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |

16. After coming out, you have become depressed.
- | | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
- Why was that score chosen _____
17. Jobs have become difficult to get since you came out.
- | | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
18. Before I came out I was suicidal.
- | | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
19. After I came out I was suicidal.
- | | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
20. My family disowned me after I came out.
- | | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |
21. I have been discriminated against since I came out.
- | | | | |
|----------------|-------|----------|-------------------|
| Strongly agree | Agree | Disagree | Strongly disagree |
| 1 | 2 | 3 | 4 |

PERSONAL CONTACT

22. In your family, friend or work circle, how many (total) LGBTQ individuals do you know? _____
23. Based on the number of LGBTQ individual(s) that you know in your circle, which of these do you consider the “closest” to you?
1. Friend
 2. Co-worker
 3. Family member
 4. None
24. On a scale of 1 to 5, with 1 being “very close” and 4 being “not close at all” please rate the level of closeness that you have to the person that you identified in the above question.
- | | | | |
|------------|-------|-----------|------------------|
| Very close | Close | Not close | Not close at all |
| 1 | 2 | 3 | 4 |

Created by Kimberly D. Carter

APPENDIX B
INFORMED CONSENT



College of Social and Behavioral Sciences

INFORMED CONSENT

This research is asking gay men between the ages of 21-40 to complete this electronic survey to answer questions regarding perceived happiness after you started living openly out. This study is being conducted by graduate student Kimberly D. Carter under the supervision of Professor Rosemary McCaslin, PhD. At California State University, San Bernardino and has been approved by the School of Social Work Sub-Committee of the Institutional Review Board Social Work Sub-committee, California State University, San Bernardino.

PURPOSE: The purpose of this research is to explore openly living gay males' perceived life satisfaction after coming out.

DESCRIPTION: Participants will be asked questions regarding perceived happiness post coming out; pertaining to relationships with family, friends and co-workers.

PARTICIPATION: Your participation is completely voluntary and you are free to withdraw your participation at any time without penalty.

ANONYMITY: All data will be stored in a password protected electronic format.

DURATION: This survey will take approximately 15 minutes to complete.

RISKS: There are no foreseeable risks to the participants.

BENEFITS: The potential benefits of this study are to be able to help social workers when dealing with clients who have recently come out or who are planning too.

CONTACT: If you have any questions or concerns regarding this study, feel free to contact Dr. Rosemary McCaslin at (909) 537-5507.

RESULTS: If you would like to obtain a copy of the results of this study, please the Pfau Library at California State University of San Bernardino located at 5500 University Parkway, San Bernardino, CA 92407 after September 2016.

ELECTRONIC CONSENT: Please select your choice below.
Clicking on the "agree" button below indicates that agree to participate in this research.

Agree

Disagree

California State University, San Bernardino
Social Work Institutional Review Board Sub-Committee
APPROVED 1/19/2016 VOID AFTER 1/18/2017
IRB# SW1629 CHAIR *[Signature]*

5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

APPENDIX C
DEBRIEFING STATEMENT

Perceived Life Satisfaction among Gay Males: The Coming-Out Process Debriefing Statement

This study you have just completed was designed to investigate the perceived life satisfaction of gay males after coming out. This study by Kimberly Carter explored your personal views on your quality of life after living openly as a gay man. In particular, this study was done to further explore the effectiveness of living openly out in with respect to happiness.

Thank you for your participation in this study. If you have any questions about the study, please feel free to contact Professor Rosemary McCaslin, PH.D., A.C.S.W. at (909) 537-5507. If you would like to obtain a copy of the results of this study, please the Pfau Library at California State University of San Bernardino located at 5500 University Parkway, San Bernardino, CA 92407 after June 2016.

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